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AMENDMENTS TO THE CLAIMS

1. (Currently Amended) A method for inhibiting or preventing T cell mediated autoimmune response tissue destruction associated with type I diabetes comprising administering to a subject in need of such treatment a therapeutically or prophylactically effective amount of a gp39 antagonist selected from the group consisting of soluble CD40, CD40 fusion protein, and an anti-gp39 antibody, or a fragment thereof that binds gp39, wherein the monoclonal antibody is produced by 89-76 hybridoma, ATCC Accession Number HB11713 or 24-31 hybridoma, ATCC Accession Number HB11712, wherein the tissue destruction results from a cell-mediated immune reaction to one or more autoantigens.

- 2. (Canceled)
- 3. (Canceled)
- 4. (Previously presented) The method of claim 1, wherein the gp39 antagonist is a fragment of an anti-gp39 antibody that binds gp39.
- 5. (Previously presented) The method of claim 1, wherein the gp39 antagonist is an anti-gp39 antibody.
- 6. (Previously presented) The method of claim 5, wherein the anti-gp39 antibody is a monoclonal antibody.
- 7. (Previously presented) The method of claim 5, wherein the anti-gp39 antibody is an anti-human gp39 antibody.
- 8. (Previously presented) The method of claim 6, wherein the monoclonal antibody is 89-76 or 24-31, or an antibody having the gp39 binding characteristics thereof.

- 9. (Previously presented) The method of claim 6, wherein the monoclonal antibody is a chimeric monoclonal antibody containing constant regions and variable regions from different species.
- 10. (Previously presented) The method of claim 6, wherein the monoclonal antibody is a humanized monoclonal antibody.
- 11. (Canceled)
- 12. (Currently amended) The method of claim 1, A method for preventing a T cell mediated autoimmune response associated with type I diabetes comprising administering to a subject in need of such treatment a prophylactically effective amount of wherein the gp39 antagonist is an anti-gp39 antibody or a gp39-binding fragment thereof, comprising variable regions of monoclonal antibody 24-31 or monoclonal antibody 89-76, or of an antibody having the gp39 binding characteristics thereof.
- 13. (Previously presented) The method of claim 12, wherein the gp39 antagonist is a gp39-binding antibody fragment comprising variable regions of monoclonal antibody 24-31.
- 14. (Previously presented) The method of claim 13, wherein the gp39-binding antibody fragment is a Fab or F(ab')₂ fragment comprising variable regions of monoclonal antibody 24-31.
- 15. (Previously presented) The method of claim 12, wherein the gp39 antagonist is a gp39-binding antibody fragment comprising variable regions of monoclonal antibody 89-76.
- 16. (Previously presented) The method of claim 15, wherein the gp39-binding antibody fragment is a Fab or F(ab')₂ fragment comprising variable regions of monoclonal antibody 89-76.

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17. (Previously presented) The method of claim 9, wherein the chimeric monoclonal anti-gp39 antibody comprises variable regions of monoclonal antibody 24-31.

- 18. (Previously presented) The method of claim 9, wherein the chimeric monoclonal anti-gp39 antibody comprises variable regions of monoclonal antibody 89-76.
- 19. (Previously presented) The method of claim 10, wherein the humanized monoclonal anti-gp39 antibody comprises variable regions of monoclonal antibody 24-31.
- 20. (Previously presented) The method of claim 10, wherein the humanized monoclonal anti-gp39 antibody comprises variable regions of monoclonal antibody 89-76.
- 21. (New) A method of preventing a T cell mediated autoimmune response associated with type I diabetes comprising the method of claim 1.